PARENT AFFIDAVIT OF HOME SCHOOLING

STATE OF FLORIDA

County of _____

BEFORE ME, the undersigned authority, personally appeared _____ who being by me first duly sworn, deposes that:

1. Affiant is _____, parent or legal guardian of _____, and makes this affidavit on personal knowledge.

2. Affiant states that the child, _____, has completed a home education program, pursuant to the requirements of FL Statute 1002.41. His/her graduation date from Home School is _____.

FURTHER, AFFIANT SAYETH NOT.

_____Signature of Parent or Guardian

STATE OF FLORIDA

County of _____

SWORN TO and subscribed before me this _____ day of _____, 20___, _____ .
(Name of person making this statement)

_____   _____
Signature of Notary Public – State of Florida   (Print, type, or stamp Commissioned Name of Notary Public)

Personally Known _____ or Produced Identification _____

Type of Identification Produced _____